UTAH PETROLEUM STORAGE TANK TRUST FUND / REQUEST FOR PAYMENT VOUCHER

Summary Worksheet

Project Manager: Date:													
SUBMITTED BY: BILL TO:													
PAYEE:	:		RELEASE NUMBER:							UTAH DEPT. of ENVIRONMENTAL QUALITY			
ADDRESS:	:		FACILITY NUMBER:							ENVIRONMENTAL RESPONSE & REMEDIATION			
	SITE NAME: 10								168 NORTH	168 NORTH 1950 WEST/ P O BOX 144840			
TYPE OF BUSINESS: SITE LOCATION:								SALT LAKE CITY, UTAH 84114-4840				4840	
SOLE P	ROPRIETOR_	PARTNERS	RTNERSHIPCORPORATION										
FED TAX IC	0 # OR SS #	PHONE:								PHONE NO. (801) 536-4100			
DATE	WORK PLAN	SERVICES RE	NDERED/DESCRIPTION - MUST INC	CLUDE COPIES OF	INVOICES, CHEC	CKS & DETAILED I	BACK-UP DOCUME	NTATION			INVOICE #	AMOUNT	
		This is an exam	ple of a 7 point font. The minimu	ım that should be	used.								
		Fill out all sections except those that are shaded or below the TOTAL SUBMITTED line.											
	Do not modify this form this form in anyway, except to fill out required information.												
	DO NO. HIGHING THE INTERNATIONAL HIGHING THE												
I the undersion	ned certify that the a	hove listed items of	services were required for this site,	that the charges as	nnearing heron are	correct and that	no part of the same	has been naid f	or by the State	of Utah			
i, the undersign	ica, certify that the ti	bove fisted femis of	services were required for this site,	that the charges up	ppeuring neron are	correct, and that	to part of the same	lius occii paid i	or by the state	or Ctain.			
											TOTAL SUBMITTED:	\$	
SIGNATURE OF RESPONSIBLE PARTY DATE SIGNATURE OF CONSULTANT FOR PROJECT DATE CLAIM # 1 LESS DISALLOWED COSTS:													
NOTE: Sign	natures of BOTH	Responsible F	Party AND Consultant require	ed for Direct Re	eimbursement	to the Consul	ant.	CLAIIVI	# 1		SALLOWED COSTS.		
			mbursement to Owner.	Ju 101 2 11 001 11				PMT #					
										TOTAL APPROVED:	\$		
										I	LESS DEDUCTIBLE:	\$	
PROJECT MAN	IAGER	DATE	ACCOUNTANT	DATE	EXECUTIVE SEC	RETARY	DATE						
												Φ.	
DOT OF OTION	MANACED	DATE	ATE MSC DATE DEQ/FINANCE DATE					TOTAL TO REIMBURSE: \$					
PST SECTION	IVIANAGEK	DATE	INISC	FUND	AGENCY	LOW ORG	DATE APPR	SOURCE	REPT CAT	PROJECT NO. / SL	IR-PRO	AMOUNT	
			EINIANIOIAI, OCCUMO							I ROOLOT NO. / SC		AWOUNT	
RPVTEMP.XLS	REV DATE	: 1/25/2000	FINANCIAL CODING	731	480	4731	731	6137	4XXX			\$	